

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Foundation for a Greater America, Inc.

ADDRESS (number and street)

P.O. Box 3587

Check if different
than previously
reported. (ACC)

Tustin

CA

92781

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00555862

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Ault, Anastacia, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Ault, Anastacia, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Foundation for a Greater America, Inc.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		3813.64
(b) Cash on Hand at Beginning of Reporting Period.....	1685.50	
(c) Total Receipts (from Line 19)	28883.00	94126.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30568.50	97939.84
7. Total Disbursements (from Line 31).....	29910.67	97282.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	657.83	657.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	220051.56	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	426426.62	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Foundation for a Greater America, Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23677.00	74956.55
(ii) Unitemized	4156.00	17668.65
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27833.00	92625.20
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	27833.00	92625.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1050.00	1501.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28883.00	94126.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28883.00	94126.20

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	29910.67	97282.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29910.67	97282.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29910.67	97282.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29910.67	97282.01

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	27833.00	92625.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27833.00	92625.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	29910.67	97282.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29910.67	97282.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 85
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Armentrout, Suzanne L., , ,

Mailing Address 2333 West 13th Street

City

The Dalles

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lutheran Choral Association

Occupation (for Individual)

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2955

Amount of Each Receipt this Period

110.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barney, Alice M., , ,

Mailing Address 8611 Cromwell Drive

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

786.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA3193

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beagle, Kahleen M., , ,

Mailing Address 23 Kirkwood Circle

City

Brigantine

State

NJ

Zip Code

08203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : INCA2866

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

640.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bennet, LeEtta, , ,

Mailing Address 240 North Pierce Street

City
Salem

State
SD

Zip Code
57058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : INCA3138

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bennet, LeEtta, , ,

Mailing Address 240 North Pierce Street

City
Salem

State
SD

Zip Code
57058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : INCA3058

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bergstorm, Nancy, , ,

Mailing Address 3935 Ramble Creek Drive

City
Missouri City

State
TX

Zip Code
77459

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Texas Houston

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : INCA3110

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Adrienna, , ,

Mailing Address 4350 Portchester Way

City
SnellvilleState
GAZip Code
30039FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : INCA3146

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Browning, Priscilla E., , ,

Mailing Address 1 Pleasant Grove Lane

City
IthacaState
NYZip Code
14850FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UnitrustOccupation (for Individual)
Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : INCA2996

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Connally, G.G., , ,

Mailing Address 12 University Avenue

City
BuffaloState
NYZip Code
14214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G.G. ConnallyOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2016

Transaction ID : INCA2875

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

726.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 85
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Connally, G.G., , ,

Mailing Address 12 University Avenue

City
BuffaloState
NYZip Code
14214FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

G.G. Connally

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M	D D	Y Y Y Y
05	03	2016

Transaction ID : INCA2947

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Currie, Barbara R., , ,

Mailing Address 4800 Filmore Avenue, Apt. 544

City

Alexandria

State

VA

Zip Code

22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
05	11	2016

Transaction ID : INCA3103

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Chistine Star, , ,

Mailing Address 851 Moraine Drive

City

Lincoln

State

NE

Zip Code

68510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lincoln Public School System

Occupation (for Individual)

Mentor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M	D D	Y Y Y Y
05	17	2016

Transaction ID : INCA3276

Amount of Each Receipt this Period

155.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

281.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
MillbraeState
CAZip Code
94030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : INCA2914

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
MillbraeState
CAZip Code
94030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2016

Transaction ID : INCA2919

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
MillbraeState
CAZip Code
94030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : INCA3154

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Devens, Jane E., , ,

Mailing Address 18251 Roas P. Court

City
North Fortmeyeyes

State
FL

Zip Code
33917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : INCA3132

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Durrwachter, Sylvia, , ,

Mailing Address 809 West 5th Street

City
Port Angeles

State
WA

Zip Code
98363

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : INCA3237

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Durrwachter, Sylvia, , ,

Mailing Address 809 West 5th Street

City
Port Angeles

State
WA

Zip Code
98363

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : INCA3147

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fishman, Esther, , ,

Mailing Address 3240 Lake Point Blvd., #327

City
Sarasota

State
FL

Zip Code
34231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2016

Transaction ID : INCA3168

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fraser, Edie A., , ,

Mailing Address 2916 32nd Street NW

City
Washington

State
DC

Zip Code
20008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEMconnector

Occupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : INCA3158

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gingiss, Randall J., , ,

Mailing Address 1035 Valley View Drive

City
Vermillion

State
SD

Zip Code
57069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of South Dakota

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2016

Transaction ID : INCA2910

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gingiss, Randall J., , ,

Mailing Address 1035 Valley View Drive

City
Vermillion

State
SD

Zip Code
57069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of South Dakota

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : INCA3060

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goldberg, Gerald, , ,

Mailing Address 20 Van Akenen, Unit 310

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : INCA3234

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goldberg, Gerald, , ,

Mailing Address 20 Van Akenen, Unit 310

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3265

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gupta, Amitava, , ,

Mailing Address 5322 Fox Den Road

City

Roanoke

State

VA

Zip Code

24018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Elenza, Inc.

Occupation (for Individual)

Chief Technical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : INCA2926

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gupta, Amitava, , ,

Mailing Address 5322 Fox Den Road

City

Roanoke

State

VA

Zip Code

24018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Elenza, Inc.

Occupation (for Individual)

Chief Technical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2016

Transaction ID : INCA3166

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hainline, Louise, , ,

Mailing Address 9 Prospect Park W

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brooklyn College

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : INCA3151

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Halsey, George A., , ,

Mailing Address 111 Camellia Way

City
Hendersonville

State
NC

Zip Code
28739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2016

Transaction ID : INCA3126

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Halsey, George A., , ,

Mailing Address 111 Camellia Way

City
Hendersonville

State
NC

Zip Code
28739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : INCA3127

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harrington, Margaret, , ,

Mailing Address 750 Lovell Avenue

City
Mill Valley

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Margaret Harrington

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2016

Transaction ID : INCA3122

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haubold, Mary E., , ,

Mailing Address 5747 Southwest 22nd Terrace, Apt.

City
Topeka

State
KS

Zip Code
66614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2016

Transaction ID : INCA3009

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haubold, Mary E., , ,

Mailing Address 5747 Southwest 22nd Terrace, Apt.

City
Topeka

State
KS

Zip Code
66614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2016

Transaction ID : INCA2906

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hayes, Elizabeth T., , ,

Mailing Address 7774 McDermott Road

City
Manlius

State
NY

Zip Code
13104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2016

Transaction ID : INCA3128

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hayes, Elizabeth T., , ,

Mailing Address 7774 McDermott Road

City
Manlius

State
NY

Zip Code
13104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : INCA3242

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henderson, Gloria M., , ,

Mailing Address 2442 Chapel Hill Road

City
Griffin

State
GA

Zip Code
30224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : INCA3291

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Huber, Jeanne, , ,

Mailing Address 5341 Cove Garden Road

City
Covesville

State
VA

Zip Code
22931

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2959

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ireland, Eileen, , ,

Mailing Address 722 5th Street

City

Las Vegas

State

NV

Zip Code

87701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of New Mexico

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : INCA3043

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ireland, Eileen, , ,

Mailing Address 722 5th Street

City

Las Vegas

State

NV

Zip Code

87701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of New Mexico

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : INCA3125

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ireland, Sue A., , ,

Mailing Address 1151 North Rush Street

City

Gary

State

IN

Zip Code

46403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

U.S. Government

Occupation (for Individual)

Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2016

Transaction ID : INCA3123

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ireland, Sue A., , ,

Mailing Address 1151 North Rush Street

City
Gary

State
IN

Zip Code
46403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U.S. Government

Occupation (for Individual)
Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2966

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City

Royal Oak

State

MD

Zip Code

21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2016

Transaction ID : INCA2985

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City

Royal Oak

State

MD

Zip Code

21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : INCA3113

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City
Royal Oak

State
MD

Zip Code
21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2016

Transaction ID : INCA3231

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City
Royal Oak

State
MD

Zip Code
21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2963

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City
Royal Oak

State
MD

Zip Code
21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : INCA3299

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Keefer, Betsy A., , ,

Mailing Address 2500 Fairway Drive

City
York

State
PA

Zip Code
17402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA3198

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Keefer, Betsy A., , ,

Mailing Address 2500 Fairway Drive

City
York

State
PA

Zip Code
17402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2016

Transaction ID : INCA3062

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Keefer, Betsy A., , ,

Mailing Address 2500 Fairway Drive

City
York

State
PA

Zip Code
17402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2016

Transaction ID : INCA3315

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kimling, L. Erlenmeyer, , ,

Mailing Address 1 Briarwood Lane

City
Stamford

State
CT

Zip Code
06903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2016

Transaction ID : INCA3145

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kimling, L. Erlenmeyer, , ,

Mailing Address 1 Briarwood Lane

City
Stamford

State
CT

Zip Code
06903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : INCA3098

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. King, Earl, , ,

Mailing Address 14505 Stetson Road

City
Los Gatos

State
CA

Zip Code
95033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : INCA3013

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : INCA3136

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2974

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matthews, Winston, , ,

Mailing Address 587 Lenox Road

City
Brooklyn

State
NY

Zip Code
11203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winston Matthews

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2943

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 85
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McAdams, Robert, , ,

Mailing Address 9753 Keeneland Row

City
La JollaState
CAZip Code
92037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M	D D	Y Y Y Y
04	14	2016

Transaction ID : INCA3074

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monahan, Janice C., , ,

Mailing Address 1130 Bridlewood Way

City
RenoState
NVZip Code
89509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M	D D	Y Y Y Y
04	07	2016

Transaction ID : INCA2987

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monahan, Janice C., , ,

Mailing Address 1130 Bridlewood Way

City
RenoState
NVZip Code
89509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M	D D	Y Y Y Y
05	03	2016

Transaction ID : INCA2952

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

450.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Montague, Phillip L., , ,

Mailing Address 2612 Sag Harbor Way

City

The Villages

State

FL

Zip Code

32162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 16 / 2016

Transaction ID : INCA3213

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Morrison, Ronald, , ,

Mailing Address 9116 Northeast 21st Court

City

Vancouver

State

WA

Zip Code

98665

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 11 / 2016

Transaction ID : INCA3116

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Ronald, , ,

Mailing Address 9116 Northeast 21st Court

City

Vancouver

State

WA

Zip Code

98665

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 17 / 2016

Transaction ID : INCA3288

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murnik, Mary, , ,

Mailing Address 331 West Slossan Avenue

City
Reed City

State
MI

Zip Code
49677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ferris State University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2939

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murnik, Mary, , ,

Mailing Address 331 West Slossan Avenue

City
Reed City

State
MI

Zip Code
49677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ferris State University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3280

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : INCA3119

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : INCA2999

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Passell, Nicholas, , ,

Mailing Address 524 Lincoln Avenue

City
Eau Claire

State
WI

Zip Code
54701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nicholas Passell

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA3215

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Passell, Nicholas, , ,

Mailing Address 524 Lincoln Avenue

City
Eau Claire

State
WI

Zip Code
54701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nicholas Passell

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : INCA3140

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Podolsky, Kathleen M., , ,

Mailing Address 300 Davey Glen Road, Apt. 3925

City
Belmont

State
CA

Zip Code
94002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2982

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pugh, Margaret M., , ,

Mailing Address 1011 D Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : INCA3047

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritti, Alyce Rey, , ,

Mailing Address 170 Cherrywood Way

City
Port Matilda

State
PA

Zip Code
16870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : INCA3095

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

415.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rosen, Alexandra E., , ,

Mailing Address 50 Taylor Road

City

Mount Cisco

State

NY

Zip Code

10549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : INCA3086

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosen, Ruth W., , ,

Mailing Address 5 Mount Hood Court

City

San Rafael

State

CA

Zip Code

94903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : INCA3293

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rosen, Ruth W., , ,

Mailing Address 5 Mount Hood Court

City

San Rafael

State

CA

Zip Code

94903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : INCA3053

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roundtree, Bennie, , ,

Mailing Address 602 Bonners Lane

City
Greenville

State
NC

Zip Code
27834

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Roundtree Real Estate

Occupation (for Individual)
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : INCA3018

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schelling, Alice Coleman, , ,

Mailing Address 8300 Burdette Road

City
Bethesda

State
MD

Zip Code
20817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : INCA3061

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schelling, Alice Coleman, , ,

Mailing Address 8300 Burdette Road

City
Bethesda

State
MD

Zip Code
20817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : INCA3007

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sims, Donald R., , ,

Mailing Address 130 Baywatch Circle

City
Fayetteville

State
GA

Zip Code
30215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : INCA3105

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Shirley, , ,

Mailing Address 6 Veterans Road, Unit 21

City
Amherst

State
NH

Zip Code
03031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : INCA3217

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Walter, , ,

Mailing Address 1803 Hickory Avenue

City
Niceville

State
FL

Zip Code
32578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Army

Occupation (for Individual)
Air Force Captain

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : INCA3300

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stahl, Jonnie B., , ,

Mailing Address 601 Laurel Avenue, Apt. 802

City

San Mateo

State

CA

Zip Code

94401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2016

Transaction ID : INCA2971

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City

Albuquerque

State

NM

Zip Code

87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : INCA2863

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City

Albuquerque

State

NM

Zip Code

87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3269

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 85

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Diana, , ,

Mailing Address 640 Davis Street, Apt. 13

City

San Francisco

State

CA

Zip Code

94111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2016

Transaction ID : INCA3100

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vitti, Bonnie, , ,

Mailing Address 10240 Moorpark Street

City

Toluca Lake

State

CA

Zip Code

91602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : INCA3111

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weinman, Diann L., , ,

Mailing Address 4310 Northwest 6th Drive

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2016

Transaction ID : INCA3195

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weinman, Diann L., , ,

Mailing Address 4310 Northwest 6th Drive

City
Des Moines

State
IA

Zip Code
50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2016

Transaction ID : INCA3155

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Werlinich, Lucille, , ,

Mailing Address 18 Ponds Lane

City
Puchase

State
NY

Zip Code
10577

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Transaction ID : INCA3032

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Nancy M., , ,

Mailing Address 1516 Enyart Way, #204

City
Annapolis

State
MD

Zip Code
21409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 09 / 2016

Transaction ID : INCA3101

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 85

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Nancy M., , ,

Mailing Address 1516 Enyart Way, #204

City
AnnapolisState
MDZip Code
21409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : INCA3002

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. William, Elizabeth, , ,

Mailing Address 2 Bishop Gadsden Way

City
CharlestonState
SCZip Code
29412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : INCA2970

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. William, Elizabeth, , ,

Mailing Address 2 Bishop Gadsden Way

City
CharlestonState
SCZip Code
29412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2016

Transaction ID : INCA3130

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

700.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 85

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Woolbright, Cynthia, , ,

Mailing Address 667 Midship Circle

City
WebsterState
NYZip Code
14580FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cynthia Woolbright

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3283

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zimmer, Deborah L., , ,

Mailing Address 648 Kirk Glen Drive

City

San Jose

State

CA

Zip Code

95133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : INCA3310

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

23677.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 85
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
Aurora

State
CO

Zip Code
80014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : INCA3734

Amount of Each Receipt this Period

350.00

☐ Memo Item

Refund of Merchant Fee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
Aurora

State
CO

Zip Code
80014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : INCA3735

Amount of Each Receipt this Period

350.00

☐ Memo Item

Refund of Merchant Fee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
Aurora

State
CO

Zip Code
80014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : INCA3736

Amount of Each Receipt this Period

350.00

☐ Memo Item

Refund of Merchant Fee

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

1050.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4131

Amount of Each Disbursement this Period

1600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4132

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4133

Amount of Each Disbursement this Period

2400.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4600.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		1	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4134

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4135

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	1		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4136

Amount of Each Disbursement this Period

600.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3100.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	2		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4137

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4138

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	7		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4139

Amount of Each Disbursement this Period

750.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1650.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2016

FEC Identification Number

C

Transaction ID : EXPB4140

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2016

FEC Identification Number

C

Transaction ID : EXPB4141

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		05		2016

FEC Identification Number

C

Transaction ID : EXPB4142

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2016

FEC Identification Number

C

Transaction ID : EXPB4143

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

FEC Identification Number

C

Transaction ID : EXPB4144

Amount of Each Disbursement this Period

1300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2016

FEC Identification Number

C

Transaction ID : EXPB4145

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4800.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4146

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4147

Amount of Each Disbursement this Period

1400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4148

Amount of Each Disbursement this Period

2400.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4600.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4149

Amount of Each Disbursement this Period

1100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4150

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4151

Amount of Each Disbursement this Period

400.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

1950.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2016

FEC Identification Number

C

Transaction ID : EXPB3708

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2016

FEC Identification Number

C

Transaction ID : EXPB3710

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		20		2016

FEC Identification Number

C

Transaction ID : EXPB3712

Amount of Each Disbursement this Period

17.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3714

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3716

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3720

Amount of Each Disbursement this Period

17.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3729

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3732

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3740

Amount of Each Disbursement this Period

17.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

51.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3750

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3752

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3757

Amount of Each Disbursement this Period

12.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

46.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

FEC Identification Number

C

Transaction ID : EXPB3763

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2016

FEC Identification Number

C

Transaction ID : EXPB3769

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2016

FEC Identification Number

C

Transaction ID : EXPB3773

Amount of Each Disbursement this Period

17.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Foundation for a Greater America, Inc.

17.00

05 / 19 / 2016

17.00

Three digital displays showing the date in MM/DD/YYYY format: 05/23/2016.

Age Group	Percentage
18-24	17.00
25-34	12.00
35-44	10.00
45-54	10.00
55-64	10.00
65-74	10.00
75-84	10.00
85+	10.00

51.00

FEC Schedule B (Form 3X) Rev. 05/2016

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	7		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3785

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citibank

Mailing Address P.O. Box 790184

City
Saint LouisState
MOZip Code
63179Purpose of Disbursement
Bank Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3789

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hodgins, James P., , ,

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781Purpose of Disbursement
Consulting Services

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	4		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3995

Amount of Each Disbursement this Period

800.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

834.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Foundation for a Greater America, Inc.

A. Microsoft Office 365

Zip Code
98052

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C							
---	--	--	--	--	--	--	--

20.00

 Memo Item

B. Microsoft Office 365

Zip Code	98052
----------	-------

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify)

District:

C

18.83

Memo Item

C. Microsoft Office 365

Zip Code
98052

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

20.00

Memo Item

58.83

[illegible]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Microsoft Office 365

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software Supplier

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB1397

Amount of Each Disbursement this Period

24.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Office 365

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software Supplier

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4381

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft Office 365

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software Supplier

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4382

Amount of Each Disbursement this Period

24.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Sprint

Mailing Address 6200 Sprint Parkway

City
Overland ParkState
KSZip Code
66251

Purpose of Disbursement

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB1401

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sprint

Mailing Address 6200 Sprint Parkway

City
Overland ParkState
KSZip Code
66251

Purpose of Disbursement

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4384

Amount of Each Disbursement this Period

87.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3700

Amount of Each Disbursement this Period

24.24

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

211.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB1391

Amount of Each Disbursement this Period

29.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3706

Amount of Each Disbursement this Period

976.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3727

Amount of Each Disbursement this Period

365.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1370.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3726

Amount of Each Disbursement this Period

365.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3725

Amount of Each Disbursement this Period

365.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3753

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

780.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3754

Amount of Each Disbursement this Period

680.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB1400

Amount of Each Disbursement this Period

26.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4385

Amount of Each Disbursement this Period

29.85

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

737.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 85

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. U.S. Bank

Mailing Address 16061 Brookhurst Street

City
Fountain ValleyState
CAZip Code
92708Purpose of Disbursement
Bank Fee

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB1392

Amount of Each Disbursement this Period

7.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. Bank

Mailing Address 16061 Brookhurst Street

City
Fountain ValleyState
CAZip Code
92708Purpose of Disbursement
Bank Fee

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB3699

Amount of Each Disbursement this Period

7.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address 16061 Brookhurst Street

City
Fountain ValleyState
CAZip Code
92708Purpose of Disbursement
Bank Fee

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4386

Amount of Each Disbursement this Period

7.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

22.50

TOTAL This Period (last page this line number only).....▶

29630.28

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 60 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3469

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

43813.34

Cumulative Payment To Date

23461.78

Balance Outstanding at Close of This Period

20351.56

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 17 / 2014

Date Due

M M / D D / Y Y Y Y
11 / 17 / 2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20351.56

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 61 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3461

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

21100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

21100.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 18 / 2014

Date Due

M M / D D / Y Y Y Y
11 / 18 / 2015

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

21100.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 62 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3501

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 18 / 2014

Date Due

M M / D D / Y Y Y Y
05 / 18 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3956

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

1200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
01 / 30 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1200.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 64 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3958

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

77400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

77400.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
01 / 30 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

77400.00

TOTALS This Period (last page in this line only)..... ►

220051.56

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 65 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3820

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Church, Judson A., , ,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

ZIP Code

07470

Original Amount of Loan

250000.00

Cumulative Payment To Date

53050.00

Balance Outstanding at Close of This Period

196950.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 27 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 23 / 2016

Interest Rate

15.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

196950.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : PAYC3820

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 67 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC1950

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Church, Judson A., , ,☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

ZIP Code

07470

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 23 / 2015

Date Due

M M / D D / Y Y Y Y
07 / 23 / 2016

Interest Rate

15.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SC/10

Transaction ID : PAYC1950

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 69 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3812

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

26500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

26500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 70 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3816

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

19000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

19000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 71 OF 85

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3818

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

13200.00

Cumulative Payment To Date

9676.79

Balance Outstanding at Close of This Period

3523.21

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3523.21

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC1964

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

12400.00

Cumulative Payment To Date

2695.00

Balance Outstanding at Close of This Period

9705.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 06 / 2015

Date Due

M M / D D / Y Y Y Y
07 / 06 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

9705.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3298

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 21 / 2015

Date Due

M M / D D / Y Y Y Y
10 / 21 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

270678.21

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 74 OF 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Card Processing & Web Design Services

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

2550.00

Transaction ID : PAYD3515

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Card Processing & Web Design Services

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

20000.00

Transaction ID : PAYD3807

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

22550.99

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 75 OF 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City
WashingtonState
DCZip Code
20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3961

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City
WashingtonState
DCZip Code
20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3966

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Office Supplies

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626

Outstanding Balance Beginning This Period

12.71

Transaction ID : PAYD2231

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12.71

1) **SUBTOTALS** This Period This Page (optional)..... ►

14.69

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 76 OF 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Office Supplies

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626

Outstanding Balance Beginning This Period

28.80

Transaction ID : PAYD2696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Postage

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626

Outstanding Balance Beginning This Period

19.60

Transaction ID : PAYD3509

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City
HendersonState
NVZip Code
89014

Outstanding Balance Beginning This Period

75.46

Transaction ID : PAYD2448

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

75.46

1) **SUBTOTALS** This Period This Page (optional)..... ►

123.86

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 77 OF 85

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

66.72

Transaction ID : PAYD2451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

57.82

Transaction ID : PAYD2455

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Loan Fee

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

450.00

Transaction ID : PAYD3792

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

450.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

574.54

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Loan Interest

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

820.87

Transaction ID : PAYD3793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

820.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Church, Judson A., , ,

Nature of Debt (Purpose):
Loan Interest Payment

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

Zip Code

07470

Outstanding Balance Beginning This Period

362.00

Transaction ID : PAYD3969

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

362.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Corporate Document Services

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

352.00

Transaction ID : PAYD1965

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

352.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1534.87

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

33.84

Transaction ID : PAYD2235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

24.12

Transaction ID : PAYD2701

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

8.28

Transaction ID : PAYD3324

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.28

1) **SUBTOTALS** This Period This Page (optional)..... ►

66.24

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

8.28

Transaction ID : PAYD3512

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

15.84

Transaction ID : PAYD3806

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

9.00

Transaction ID : PAYD3967

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

33.12

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CrossClick Media, Inc.

Nature of Debt (Purpose):
Call Center

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las VegasState
NVZip Code
89123

Outstanding Balance Beginning This Period

62747.69

Transaction ID : PAYD3962

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

62747.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodgins, James P., , ,

Nature of Debt (Purpose):
Consulting Services

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781

Outstanding Balance Beginning This Period

800.00

Transaction ID : PAYD3510

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodgins, James P., , ,

Nature of Debt (Purpose):
Consulting Services

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781

Outstanding Balance Beginning This Period

1489.05

Transaction ID : PAYD3804

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1489.05

1) SUBTOTALS This Period This Page (optional)..... ►

64236.74

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodgins, James P., , ,

Nature of Debt (Purpose):
Consulting Services

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781

Outstanding Balance Beginning This Period

9000.00

Transaction ID : PAYD3959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

InFind.com, Inc.

Nature of Debt (Purpose):
Management Consulting Services

Mailing Address 12021 Wilshire Blvd., Suite 634

City
Los AngelesState
CAZip Code
90025

Outstanding Balance Beginning This Period

6100.00

Transaction ID : PAYD1975

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

InFind.com, Inc.

Nature of Debt (Purpose):
Management Consulting Services

Mailing Address 12021 Wilshire Blvd., Suite 634

City
Los AngelesState
CAZip Code
90025

Outstanding Balance Beginning This Period

20000.00

Transaction ID : PAYD2183

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

35100.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jeff Taylor Graphics

Nature of Debt (Purpose):

Design of Logo, Letterhead and Envelopes

Mailing Address 2633 Lincoln Blvd., Suite 837

City

Santa Monica

State

CA

Zip Code

90405

Outstanding Balance Beginning This Period

2075.00

Transaction ID : PAYD2201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2075.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

John Cowan Law

Nature of Debt (Purpose):

Legal Services

Mailing Address 100 Pine Street, Suite 1250

City

San Francisco

State

CA

Zip Code

94111

Outstanding Balance Beginning This Period

15550.15

Transaction ID : PAYD1976

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15550.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Propel Management Group, Inc.

Nature of Debt (Purpose):

Consulting Services for Call Center

Mailing Address 3625 W. Macarthur Blvd., #302.

City

Santa Ana

State

CA

Zip Code

92704

Outstanding Balance Beginning This Period

726.78

Transaction ID : PAYD2239

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

726.78

1) SUBTOTALS This Period This Page (optional)..... ►

18351.93

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Propel Management Group, Inc.

Nature of Debt (Purpose):
Professional Services

Mailing Address 3625 W. Macarthur Blvd., #302.

City
Santa AnaState
CAZip Code
92704

Outstanding Balance Beginning This Period

129.55

Transaction ID : PAYD3507

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

129.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Spaziano, Joe, , ,

Nature of Debt (Purpose):
Computer Services

Mailing Address 1928 E. Van Owen Avenue, Apt. A

City
OrangeState
CAZip Code
92867

Outstanding Balance Beginning This Period

80.96

Transaction ID : PAYD3516

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

80.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

State of California-Franchise Tax Board

Nature of Debt (Purpose):
Penalty Fee

Mailing Address P.O. Box 942857

City
SacramentoState
CAZip Code
94257

Outstanding Balance Beginning This Period

250.00

Transaction ID : PAYD3963

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

460.51

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Womble Carlyle Sandridge & Rice, LLP

Nature of Debt (Purpose):

Legal Services

Mailing Address 1200 19th Street NW, Suite 500

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

12264.92

Transaction ID : PAYD2208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12264.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Womble Carlyle Sandridge & Rice, LLP

Nature of Debt (Purpose):

Legal Services

Mailing Address 1200 19th Street NW, Suite 500

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

436.00

Transaction ID : PAYD2722

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

12700.92

2) **TOTALS** This Period (last page this line number only)..... ►

155748.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

270678.21

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

426426.62